UTILITY	Atty Doc. No. 53813 Total Page 13		
PATENT APPLICATION	FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER		
TRANSMITTAL	Christian MILLER		
	Express Mail Label No.		
Application Elements	Address To: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231		
./X /Fee transmittal Form	6. / / Microfiche Computer Program (Appendix)		
(Submit an original, and a duplicate for fee processing) 2./ X /Specification Total Pages /10 / (Preferred arrangement set for below)	/7./ /Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
Descriptive title of the Invention	a./ / Computer Readable Copy		
Cross References to Related Application	b/ / Paper Copy (Identical to computer copy)		
Statement Regarding Fed. Sponsored R & D	c/ / Statement verifying identity of above copies		
Reference to Microfiche Appendix	ACCOMPANYING APPLICATIONS PARTS		
Background of the Invention	8./ X / Assignment Papers (cover sheet & document(s)		
Brief Summary of the Invention	9/ /37 CFR 3.73(b)Statement / /Power of Attorney		
Brief Description of the Drawings (if filed)	10./ /English Translation Document (if applicable)		
Detailed Description	11./ /Information Disclosure / / Copies of IDS Citations		
Claim(s)	12 / X /Preliminary Amendment		
Abstract of the Disclosure	13 / x/Return Receipt Postcard (MPEP 503)		
3./ X / Drawing(s)(35 USC 113)(Figs.) Total Sheets /2 / I./ x / Oath or Declaration Total Pages/ 3 /	Should be specifically itemized) 14. / Small Entity / Statement filed in prior application Statements State		
a / X / Newly executed (original or copy) b / Copy from a prior application (37 CFR 163(d) (For Continualion/Dynksjonal with Box 17 complet i / / DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior applic sec 37 CFR 1.63(d)(2) and 1.3(b). The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 49	ation		
is considered as being part of the disclosure of the accompa application and is hereby incorporated by reference therein.			

<ol><li>If a Continuing Application, check appropriate box and supply the requisite information:</li></ol>							
/ /Continuation / /Divisional / / Continu	ation-in part (CIP) of prior application No						
CORRESPONDENCE ADDRESS		Ī					
/ Customer Number or Bar code Label	or / / Correspondence address below	_					

Insert Customer No. or Attach bar code label here

Herbert B. Keil KEIL & WEINKAUF

Address: City Country 1350 Connecticut Ave., N.W. Washington USA Telephone: State: D.C. Telephone: (202)659-0100 Zip Code 20036 Fax: (202)659-0105

	Number	Number	SMALL/LARGE				
For:	Filed	Extra	ENTITY	<u>\$375./\$750.</u>			
			\$09./\$18. =				
Indep. Claims:	3	= x	\$42./\$84. =				
[ ] Multiple Dependent Claim(s) presented:\$140./280 =							
[x] A check is	enclosed fo	r the filin	ng fee.	\$ 750.			
*If the differ	ence is less	than zero,	enter "0".				
[V] A shook f	or ¢700 fo	r the filir	a foo and rogord	lation foo			

[X] The Commissioner is hereby authorized to charge any other fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s) of time under 37 CFR 1.136, to be charged to ou

extension(s) of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

KEIL & WEINKAUF Herbert B. Keil Reg. No. 18,967

Respectfully submitted,

1350 Connecticut Ave., N.W Washington, D.C. 20036 (202)659-0100